



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. MTI-31607

Inventor Application of : Teck Kheng Lee
Serial No. : 10/050,507
Filing Date : January 16, 2002
For : Elimination of RDL Using Tape Base Flip Chip on Flex for Die Stacking
Group Art Unit : 2812
Confirmation No. : 7687

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I hereby certify that, on the date shown below, this correspondence is being:

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

☒ deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

Mailing

37 CFR 1.8(a)

☐ with sufficient postage as first class mail ☒ As "Express Mail Post Office to Addressee" Mailing Label No. EV-264092504 US

37 CFR 1.10

☐ transmitted by facsimile to Fax No. _____
Date: Jan 6, 2003 **Transmission** addressed to Examiner _____ at the US Patent and Trademark Office.

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL

1. Transmitted herewith is:

- Preliminary Amendment
- Replacement Claims (27 sheets)
- Blacklined Claims (27 sheets)
- Return Postcard

STATUS

2. Applicant is a large entity.



Transmittal

EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

[X] Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.

[] Applicant petitions for an extension of time under 37 C.F.R. 1.136 for the total number of months checked below [fees: 37 C.F.R. 1.17(a)(1)-(4)] :

Extension
(months)

[] one month
[] two months
[] three months
[] four months

Fee for other than
small entity

\$ 110.00
\$ 390.00
\$ 890.00
\$ 1,390.00

Fee for
small entity

\$ 55.00
\$ 195.00
\$ 445.00
\$ 695.00

Fee: **\$0.00**

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If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For	Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	146	Minus 115	=	x 9= \$		
Independent	25	Minus 19	=	x 42= \$		
FIRST PRESENTATION OF MULTIPLE DEP CLAIM					31 x 18	\$558.00
					6 x 84	\$504.00

TOTAL
ADDIT. Fee \$

or TOTAL
ADDIT. FEE **\$1,062.00**

c. [] No additional fee for claims is required.

d. [X] Total additional fee for claims required **\$1,062.00**

FEE DEFICIENCY

5. [X] If any additional extension and/or fee is required, charge Account No. 23-2053.

[X] If any additional fee for claims is required, charge Account No. 23-2053.

Date: January 6, 2003

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